

## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?	Yes
Title::	GENETIC POLYMORPHISMS ASSOCIATED WITH RHEUMATOID ARTHRITIS, METHODS OF DETECTION AND USES THEREOF
Attorney Docket Number::	CL001505
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	01
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country:	US
Status::	Full Capacity
Given Name::	Michele
Middle Name::	
Family Name::	CARGILL
City of Residence::	San Francisco
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	c/o Celera Genomics 45 West Gude Drive Rockville
City of mailing address::	
State or Province of mailing address:	MD
Postal or Zip Code of mailing address:	20850

Applicant Authority type::	Inventor
Primary Citizenship Country:	US
Status::	Full Capacity
Given Name::	Ann
Middle Name::	Bethea
Family Name::	BEGOVICH
City of Residence::	El Cerrito
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	c/o Celera Genomics 45 West Gude Drive Rockville
City of mailing address::	
State or Province of mailing address:	MD
Postal or Zip Code of mailing address:	20850

Applicant Authority type::	Inventor
Primary Citizenship Country:	US
Status::	Full Capacity
Given Name::	Victoria
Middle Name::	Elizabeth Hope
Family Name::	CARLTON
City of Residence::	San Francisco
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	c/o Celera Genomics 45 West Gude Drive
City of mailing address::	Rockville
State or Province of mailing address:	MD
Postal or Zip Code of mailing address:	20850
Applicant Authority type::	Inventor
Primary Citizenship Country:	US
Status::	Full Capacity
Given Name::	Steven
Middle Name::	Jon
Family Name::	SCHRODI
City of Residence::	Livermore
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	c/o Celera Genomics 45 West Gude Drive
City of mailing address::	Rockville
State or Province of mailing address:	MD
Postal or Zip Code of mailing address:	20850
Applicant Authority type::	Inventor
Primary Citizenship Country:	US
Status::	Full Capacity
Given Name::	Heather
Middle Name::	Camille
Family Name::	ALEXANDER
City of Residence::	Alameda
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	c/o Celera Genomics 45 West Gude Drive
City of mailing address::	Rockville
State or Province of mailing address:	MD
Postal or Zip Code of mailing address:	20850

**Correspondence Information****Correspondence**

Customer Number:: 25748  
Phone number:: 240-453-3812  
Fax number:: 240-453-3084  
E-mail address:: Justin.Karjala@celera.com

**Representative Information**

Representative  
Customer Number: 25748

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
Which is a:	Non-Provisional of	60/443,566	01/30/2003
	Non-Provisional of	60/455,444	03/18/2003
	Non-Provisional of	60/465,241	04/25/2003
	Non-Provisional of	60/495,115	08/15/2003
	Non-Provisional of	60/519,270	11/13/2003

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name:: APPLERA CORPORATION  
Street of mailing address:: 301 Merritt 7  
City of mailing address:: Norwalk Connecticut  
Country of mailing address:: UNITED STATES OF AMERICA  
Postal or Zip Code of mailing address:: 06856-5435